

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

American Academy of Otolaryngology-Head and Neck Surgery ENT PAC

A.

Full Name (Last, First, Middle Initial)

LARSON FOR CONGRESS

Mailing Address 330 Main Street

City  
Hartford

State  
CT

Zip Code  
06106

Purpose of Disbursement  
Contribution to Federal Candidate

Candidate Name  
Rep. John B. Larson

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CT District: 01

Transaction ID: D116237

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

BUCSHON FOR CONGRESS

Mailing Address PO Box 250

City  
Newburgh

State  
IN

Zip Code  
47629

Purpose of Disbursement  
Contribution to Federal Candidate

Candidate Name  
Rep. Larry Bucshon, MD

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IN District: 08

Transaction ID: D116244

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

MIKE THOMPSON FOR CONGRESS

Mailing Address 5429 Madison Avenue

City  
Sacramento

State  
CA

Zip Code  
95841

Purpose of Disbursement  
Contribution to Federal Candidate

Candidate Name  
Rep. Mike Thompson

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 01

Transaction ID: D116236

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

7500.00

**TOTAL** This Period (last page this line number only) .....